# Exhibit A

					CL	ASS A MEN	<b>IBERS</b>				
Employee Number	Claimed Secured Amount	Allowed Secured Claim Amount	Scheduled Priority Amount	Claimed Priority Amount	Allowed Priority Claim Amount	Priority Medical Claim Amount	Priority Dental Claim Amount	Taxable Priority Claim Amount	Scheduled Unsecured Amount	Claimed Unsecured Amount	Allowed Unsecured Claim Amount
1					\$300.93	\$0.00	\$0.00	\$300.93			\$0.00
2					\$1,232.29	\$0.00	\$0.00	\$1,232.29			\$0.00
3					\$7,837.74	\$0.00	\$2,368.00	\$5,469.74	\$9,259.19	\$9,258.19	\$3,788.45
4				\$76,543.00	\$12,850.00	\$0.00	\$148.00	\$12,702.00	\$3,410.20		\$55,715.52
5					\$75.83			\$75.83			\$0.00
6					\$2,579.78	\$0.00 \$0.00	\$0.00 \$0.00	\$2,579.78	\$798.20		\$377.05
7					\$112.85	\$0.00	\$0.00	\$112.85	\$190.20		\$0.00
8					\$112.85	\$0.00	\$0.00	\$112.85			\$0.00
9				\$149,636.55	\$12,850.00	\$476.32	\$1,225.60	\$11,148.08	\$6,652.35		\$124,802.44
10					\$619.98	\$0.00	\$0.00	\$619.98			\$0.00
11			\$4,903.50	\$19,558.09	\$10,911.08	\$71.26	\$0.00	\$10,839.82	\$2,198.48		\$1,190.70
12					\$682.50	\$0.00	\$0.00	\$682.50			\$0.00
13					\$1,631.50	\$0.00	\$0.00	\$1,631.50			\$0.00
14			\$5,103.00	\$11,544.36	\$11,000.75	\$0.00	\$1,702.00	\$9,298.75	\$2,147.11		\$1,268.10
15					\$468.00	\$0.00	\$0.00	\$468.00			\$0.00
16					\$568.75	\$0.00	\$0.00	\$568.75			\$0.00
17					\$167.92	\$0.00	\$0.00	\$167.92			\$0.00
18				\$150,685.19	\$12,850.00	\$1,226.13	\$1,020.00	\$10,603.87	\$5,111.50		\$107,223.40
19 20					\$514.58 \$543.83	\$0.00 \$0.00	\$0.00 \$0.00	\$514.58 \$543.83			\$0.00 \$0.00
21				\$170,000.00	\$12,850.00	\$170.26	\$280.00	\$12,399.74	\$8,782.00		\$144,986.65
22				, ,,,,,,,,	\$485.88	\$0.00	\$0.00	\$485.88	<b>,</b> -,		\$0.00
23					\$1,167.83	\$0.00	\$0.00	\$1,167.83			\$0.00
24					\$468.00	\$0.00	\$0.00	\$468.00			\$0.00
25					\$492.92	\$0.00	\$0.00	\$492.92			\$0.00
26					\$1,175.96	\$0.00	\$0.00	\$1,175.96			\$0.00
27				\$13,871.10	\$8,158.19	\$2,374.07	\$2,408.00	\$3,376.12	\$2,276.80	\$46,128.90	\$1,479.80
28 29					\$7,015.43	\$0.00	\$146.00	\$6,869.43	\$3,587.55	\$9,342.06	\$2,295.55 \$124,638.66
29					\$12,850.00	\$0.00	\$943.00	\$11,907.00	\$6,731.65		\$124,038.00
30					\$676.64	\$0.00	\$0.00	\$676.64	\$365.00		\$206.00
31					\$151.67	\$0.00	\$0.00	\$151.67			\$0.00
32				\$13,317.50	\$7,296.77	\$0.00	\$1,920.40	\$5,376.37	\$2,737.63		\$1,048.01
33					\$920.00	\$0.00	\$920.00	\$0.00			\$0.00
34				\$164,703.25	\$12,850.00	\$0.00	\$627.20	\$12,222.80	\$6,509.55	\$164,703.25	\$117,289.96
35					\$936.00	\$0.00	\$0.00	\$936.00			\$0.00
36 37				\$12,850.00	\$3,927.86	\$3,147.86	\$280.00	\$500.00	\$1,964.70	\$2,054.54	\$2,064.70 \$807.50
				\$1,122.30	\$1,091.52	\$0.00	\$0.00	\$1,091.52	\$1,122.30		
38 39				\$321,307.75	\$171.53 \$12,850.00	\$0.00	\$0.00 \$544.80	\$171.53 \$2.541.53	\$6 420 OF	¢24.404.40	\$0.00 \$118,020.83
40				φ321,301./5	\$12,850.00	\$8,763.67 \$86.98	\$4,545.00	\$3,541.53 \$3,336.11	\$6,439.95	\$34,404.19	\$118,020.83

Employee Number	Claimed Secured Amount	Allowed Secured Claim Amount	Scheduled Priority Amount	Claimed Priority Amount	Allowed Priority Claim Amount	Priority Medical Claim Amount	Priority Dental Claim Amount	Taxable Priority Claim Amount	Scheduled Unsecured Amount	Claimed Unsecured Amount	Allowed Unsecured Claim Amount
41					\$936.00	\$0.00	\$0.00	\$936.00			\$0.00
42					\$451.39	·	·	\$451.39			\$0.00
43						\$0.00	\$0.00				\$0.00
					\$872.08	\$0.00	\$0.00	\$872.08			
44					\$4,153.50	\$0.00	\$0.00	\$4,153.50	\$2,865.55		\$1,971.55
45					\$569.29	\$0.00	\$0.00	\$569.29			\$0.00
46					\$451.39	\$0.00	\$0.00	\$451.39			\$0.00
47					\$171.53	\$0.00	\$0.00	\$171.53			\$0.00
48				\$137,973.32	\$12,850.00	\$0.00	\$0.00	\$12,850.00	\$6,249.45		\$109,442.90
49					\$48.75	\$0.00	\$0.00	\$48.75			\$0.00
50			\$5,182.80	\$10,717.69	\$10,638.97	\$0.00	\$1,050.80	\$9,588.17	\$1,604.59		\$1,287.70
51				\$106,304.50	\$12,850.00	\$0.00	\$1,562.00	\$11,288.00	\$4,151.75		\$84,309.63
52				\$94,233.57	\$12,850.00	\$0.00	\$0.00	\$12,850.00	\$3,732.75		\$83,517.65
53					\$23.47	\$0.00	\$0.00	\$23.47			\$0.00
54					\$985.83	\$0.00	\$0.00	\$985.83			\$0.00
55					\$492.92	\$0.00	\$0.00	\$492.92			\$0.00
56			\$5,493.60	\$13,079.62	\$9,519.32	\$0.00	\$228.80	\$9,290.52	\$1,364.15		\$1,364.15
57			<b>V</b> • • • • • • • • • • • • • • • • • • •	\$85,686.37	\$12,850.00	\$0.00	\$0.00	\$12,850.00	\$3,378.50		\$54,656.56
58					\$462.22	\$0.00	\$0.00	\$462.22			\$0.00
59					ψ+02.22	ψ0.00	ψ0.00	ψ+02.22			\$0.00
					\$1,618.50	\$0.00	\$0.00	\$1,618.50			*****
60					\$910.00	\$0.00	\$0.00	\$910.00			\$0.00
61					\$451.57	\$0.00	\$0.00	\$451.57			\$0.00
62					\$468.00	\$0.00	\$0.00	\$468.00			\$0.00
63					\$180.56	\$0.00	\$0.00	\$180.56			\$0.00
64					\$468.00	\$0.00	\$0.00	\$468.00			\$0.00
65					\$958.75	\$0.00	\$0.00	\$958.75			\$0.00
66					\$12,850.00	\$0.00	\$190.00	\$12,660.00	\$3,359.80		\$64,133.24
67					\$857.64	\$0.00	\$0.00	\$857.64	φοισσοίσσ		\$0.00
68					\$543.83	\$0.00	\$0.00	\$543.83			\$0.00
69					\$1,087.67	\$0.00	\$0.00	\$1,087.67			\$0.00
70					\$998.83	\$0.00	\$0.00	\$998.83			\$0.00
71					\$1,163.50	\$0.00	\$0.00	\$1,163.50	\$178.00	\$178.00	\$0.00
72					\$1,649.94	\$0.00	\$0.00	\$1,649.94	\$447.90	,	\$0.00
73					\$451.39	\$0.00	\$0.00	\$451.39			\$0.00
74					\$303.33	\$0.00	\$0.00	\$303.33			\$0.00
75					\$647.29	\$0.00	\$0.00	\$647.29			\$0.00
76					\$5,907.22	\$1,896.35	\$1,412.00	\$2,598.87	\$522.36		\$0.00
77					\$3,452.48	\$0.00	\$0.00	\$3,452.48	\$1,362.05		\$1,362.05
78					\$4,866.20	\$0.00	\$0.00	\$4,866.20	\$4,865.40		\$3,021.24
79					\$691.89	\$0.00	\$0.00	\$691.89			\$0.00
80					\$4,275.48	\$0.00	\$0.00	\$4,275.48	\$1,555.00		\$536.80
81				\$300.00	\$10,599.09			\$3,242.01	\$3,664.81		\$3,125.47

Employee Number	Claimed Secured Amount	Allowed Secured Claim Amount	Scheduled Priority Amount	Claimed Priority Amount	Allowed Priority Claim Amount	Priority Medical Claim Amount	Priority Dental Claim Amount	Taxable Priority Claim Amount	Scheduled Unsecured Amount	Claimed Unsecured Amount	Allowed Unsecured Claim Amount
82					\$1,113.67	\$0.00	\$0.00	\$1,113.67			\$0.00
83					\$492.92	\$0.00	\$0.00	\$492.92			\$0.00
84						ψ0.00	ψ0.00		<b>A</b> E 404.00		\$3,031.12
					\$2,656.60	\$0.00	\$1,924.40	\$732.20	\$5,464.29		
85				\$177,742.13	\$12,850.00	\$388.50	\$1,120.00	\$11,341.50	\$9,016.65		\$152,624.14
86				\$239,458.22	\$12,850.00	\$0.00	\$0.00	\$12,850.00	\$4,816.10		\$93,707.29
87 88					\$40.63 \$1,631.50	\$0.00 \$0.00	\$0.00 \$0.00	\$40.63 \$1,631.50			\$0.00 \$0.00
89					\$468.00	\$0.00	\$0.00	\$468.00			\$0.00
90					\$543.83	\$0.00	\$0.00	\$543.83			\$0.00
91			\$4,886.70	\$16,896.20	\$9,289.61	\$0.00	\$179.20	\$9,110.41	\$1,716.59		\$1,186.80
92					\$2,076.26	\$0.00	\$0.00	\$2,076.26	\$2,825.08	\$2,825.08	\$1,711.10
93					\$731.79	\$0.00	\$0.00	\$731.79			\$0.00
94			\$4,819.50	\$8,495.98	\$12,850.00	\$3,717.08	\$1,454.40	\$7,678.52	\$1,198.55		\$1,667.71
95					\$303.33	\$0.00	\$0.00	\$303.33			\$0.00
96					\$151.67	\$0.00	\$0.00	\$151.67			\$0.00
97					\$1,631.50	\$0.00	\$0.00	\$1,631.50			\$0.00
98	\$2,093.35	\$0.00		\$2,500.00	\$12,850.00	\$0.00	\$2,176.20	\$10,673.80	\$3,811.35	\$1,718.00	\$108,391.85
99 100					\$492.92	\$0.00	\$0.00 \$0.00	\$492.92			\$0.00 \$0.00
101					\$162.50 \$527.22	\$0.00	\$0.00	\$162.50 \$527.22			\$0.00
102					\$492.92	\$0.00 \$0.00	\$0.00	\$492.92			\$0.00
103					\$300.92	\$0.00	\$0.00	\$300.92			\$0.00
104					\$543.83	\$0.00	\$0.00	\$543.83			\$0.00
105					\$12,850.00	\$0.00	\$0.00	\$12,850.00	\$4,713.90		\$100,280.37
106			\$833.63		\$1,945.14	\$0.00	\$0.00	\$1,945.14	\$1,138.69		\$0.00
107					\$4,398.34	\$608.81	\$0.00	\$3,789.53	\$2,503.00		\$868.35
108					\$492.92	\$0.00	\$0.00	\$492.92			\$0.00
109					\$468.00	\$0.00	\$0.00	\$468.00			\$0.00
110 111					\$131.24 \$456.03	\$0.00	\$0.00	\$131.24 \$456.03	\$112.97		\$0.00 \$0.00
112					\$12,850.00	\$0.00	\$0.00 \$320.00	\$12,530.00	\$6,972.00		\$133,491.27
113					\$541.67	\$0.00 \$0.00	\$0.00	\$541.67			\$0.00
114					\$252.33	\$0.00	\$0.00	\$252.33			\$0.00
115			\$4,491.90	\$16,282.18	\$8,258.79	\$0.00	\$361.40	\$7,897.39	\$1,264.74		\$1,090.20
116			\$771.60	\$2,347.27	\$6,667.38	\$0.00	\$436.00	\$6,231.38	\$2,088.12	\$2,088.12	\$4,655.71
117					\$1,087.67	\$0.00	\$0.00	\$1,087.67			\$0.00
118					\$257.29	\$0.00	\$0.00	\$257.29			\$0.00
119					\$75.83	\$0.00	\$0.00	\$75.83			\$0.00
120					\$492.92	\$0.00	\$0.00	\$492.92			\$0.00
121				\$122.72	\$287.97	\$0.00	\$0.00	\$287.97	\$122.72		\$0.00
122 123					\$5,116.26	\$0.00	\$212.00	\$4,904.26	\$2,963.72	\$3,507.72	\$2,039.96 \$0.00
123					\$595.83	\$0.00	\$0.00	\$595.83			φυ.υυ

Employee Number	Claimed Secured Amount	Allowed Secured Claim Amount	Scheduled Priority Amount	Claimed Priority Amount	Allowed Priority Claim Amount	Priority Medical Claim Amount	Priority Dental Claim Amount	Taxable Priority Claim Amount	Scheduled Unsecured Amount	Claimed Unsecured Amount	Allowed Unsecured Claim Amount
124				\$12,850.00	\$12,850.00	\$0.00	\$0.00	\$12,850.00	\$6,545.70	\$12,850.00	\$118,821.93
125					\$12,850.00	\$0.00	\$0.00	\$12,850.00	\$3,308.15		\$63,159.65
126					\$459.60	\$0.00	\$0.00	\$459.60	\$280.54		\$0.00
127					\$379.17	\$0.00	\$0.00	\$379.17			\$0.00
128				\$7,020.00	\$328.61	\$0.00	\$0.00	\$328.61		\$3,510.00	\$0.00
129			\$5,050.50	\$7,505.40	\$7,058.35	\$0.00	\$156.00	\$6,902.35	\$1,255.40	\$5,050.00	\$1,399.70
130			\$4,586.40	\$9,068.87	\$9,706.15	\$0.00	\$1,079.00	\$8,627.15	\$1,421.63		\$1,141.20
131					\$482.29	\$0.00	\$0.00	\$482.29	\$162.77		\$0.00
132					\$451.39	\$0.00	\$0.00	\$451.39			\$0.00
133				\$12,850.00	\$569.29	\$0.00	\$0.00	\$569.29	\$46,658.64	\$58,077.00	\$73,320.46
134					\$492.92	\$0.00	\$0.00	\$492.92			\$0.00
135				\$12,850.00	\$3,881.20	\$0.00	\$207.60	\$3,673.60	\$13,539.51	\$12,531.82	\$7,447.94
136					\$8,151.10	\$2,015.20	\$137.00	\$5,998.90	\$1,225.25		\$1,462.10
137					\$5,081.74	\$0.00	\$1,464.00	\$3,617.74	\$1,096.00		\$274.05
138					\$11,725.24	\$4,492.08	\$2,163.60	\$5,069.56	\$4,589.35		\$3,185.45
139					\$492.92	\$0.00	\$0.00	\$492.92			\$0.00
140					\$2,419.44	\$0.00	\$0.00	\$2,419.44			\$0.00
141					\$695.50	\$0.00	\$0.00	\$695.50			\$0.00
142					\$3,201.98	\$0.00	\$0.00	\$3,201.98	\$940.31		\$0.00
143 144					\$303.33	\$0.00	\$0.00	\$303.33			\$0.00 \$0.00
				20.055.07	\$492.92	\$0.00	\$0.00	\$492.92	20.055.07		
145 146				\$2,055.37	\$5,985.41 \$1,730.04	\$546.75 \$0.00	\$200.00 \$0.00	\$5,238.66 \$1,730.04	\$2,055.37 \$1,349.00		\$1,111.20 \$133.08
147					\$1,730.04		\$0.00	\$1,730.04 \$752.38	\$1,349.00		\$0.00
148					\$3,981.00	\$0.00 \$0.00	\$0.00	\$3,981.00			\$0.00
149					\$1,239.33	\$0.00	\$0.00	\$1,239.33			\$0.00
150					\$8,091.27	\$0.00	\$0.00	\$8,091.27	\$3,613.08		\$4,861.36
151					\$902.78	\$0.00	\$0.00	\$902.78	\$210.00	\$210.00	\$0.00
152					\$2,339.17	\$0.00	\$0.00	\$2,339.17	\$839.90	\$839.90	\$615.50
153					\$455.00	\$0.00	\$0.00	\$455.00			\$0.00
154					\$3,775.25	\$0.00	\$0.00	\$3,775.25	\$997.99		\$170.94
155					\$413.94	\$0.00	\$0.00	\$413.94			\$0.00
156					\$6,390.68	\$0.00	\$811.20	\$5,579.48	\$5,528.68		\$3,833.17
157					\$8,830.61	\$1,846.55	\$1,982.40	\$5,001.66	\$262.06	\$262.06	\$0.00
158			\$5,613.30	\$20,186.65	\$11,073.99	\$0.00	\$352.40	\$10,721.59	\$2,516.21	\$52.82	\$1,393.55
159					\$3,364.50	\$0.00	\$0.00	\$3,364.50	\$3,182.62	\$3,182.62	\$2,220.45
160					\$6,282.24	\$473.96	\$103.60	\$5,704.68	\$3,048.00	\$4,085.96	\$1,957.00
161					\$1,210.81	\$0.00	\$0.00	\$1,210.81	·		\$0.00
162					\$516.03	\$0.00	\$0.00	\$516.03			\$0.00
163				\$198,013.83	\$12,850.00	\$7,522.22	\$2,490.80	\$2,836.98	\$6,974.10	-	\$143,301.76
164			\$778.13	\$2,152.82	\$4,328.43	\$0.00	\$0.00	\$4,328.43	\$1,374.69		\$0.00
165					\$688.96	\$0.00	\$9.60	\$679.36			\$0.00
166					\$1,769.05	\$200.00	\$664.00	\$905.05	\$254.15	\$245.15	\$0.00
167					\$257.29	\$0.00	\$0.00	\$257.29	\$60.59		\$0.00

Employee Number	Claimed Secured Amount	Allowed Secured Claim Amount	Scheduled Priority Amount	Claimed Priority Amount	Allowed Priority Claim Amount	Priority Medical Claim Amount	Priority Dental Claim Amount	Taxable Priority Claim Amount	Scheduled Unsecured Amount	Claimed Unsecured Amount	Allowed Unsecured Claim Amount
168					\$2,174.33	\$0.00	\$0.00	\$2,174.33			\$0.00
169					\$492.92	\$0.00	\$0.00	\$492.92			\$0.00
170				\$420.00	\$303.33	\$0.00	\$0.00	\$303.33			\$0.00
171					\$1,631.50	\$0.00	\$0.00	\$1,631.50			\$0.00
172					\$328.61	\$0.00	\$0.00	\$328.61			\$0.00
173 174			\$866.25		\$6,842.27	\$0.00	\$1,260.00	\$5,582.27	\$2,252.26		\$3,330.02 \$3,220.04
			\$816.38		\$5,483.52	\$0.00	\$794.00	\$4,689.52	\$1,768.81	\$2,585.19	
175					\$12,850.00	\$0.00	\$0.00	\$12,850.00	\$4,576.36		\$66,385.94
176				\$12,850.00	\$12,850.00	\$0.00	\$0.00	\$12,850.00	\$6,559.20	\$147,505.81	\$128,360.18
177 178				\$400.7C	\$677.08	\$0.00	\$0.00	\$677.08	£400.70		\$0.00 \$0.00
178				\$189.76	\$361.29	\$0.00	\$0.00	\$361.29	\$189.76		\$0.00
				\$1,525.00	\$357.45	\$0.00	\$0.00	\$357.45	\$100.16	\$1,525.00	\$0.00
180					\$1,674.42	\$717.56	\$332.00	\$624.86	\$179.00		\$89.76
181					\$847.17	\$0.00	\$0.00	\$847.17			\$0.00
182					\$468.00	\$0.00	\$0.00	\$468.00			\$0.00
183					\$468.00	\$0.00	\$0.00	\$468.00			\$0.00
184 185					\$12,850.00	\$0.00	\$4,898.00	\$7,952.00	\$5,007.35		\$106,577.88 \$0.00
186			\$915.00		\$1,631.50 \$2,969.00	\$0.00	\$0.00	\$1,631.50 \$1,769.00	\$1,683.60		\$0.00
187			\$957.60	\$1,575.67	\$7,793.80	\$0.00	\$1,200.00	\$7,083.80	\$909.72		\$5,508.13
188				\$3,961.20	\$6,199.47	\$0.00	\$710.00	\$3,465.67	\$3,850.20		\$2,258.91
189					\$328.61	\$0.00 \$0.00	\$2,733.80 \$0.00	\$328.61			\$0.00
190					\$549.25	\$0.00	\$0.00	\$549.25			\$0.00
191					\$343.06	\$0.00	\$0.00	\$343.06	\$7.78		\$0.00
192					\$1,431.44	\$0.00	\$0.00	\$1,431.44			\$0.00
193					\$7,713.05	\$1,661.56	\$112.00	\$5,939.49	\$5,027.58		\$3,359.45
194					\$8,213.92	\$0.00	\$1,837.00	\$6,376.92	\$3,652.87		\$1,246.56
195					\$827.67	\$0.00	\$0.00	\$827.67			\$0.00
196					\$379.17	\$0.00	\$0.00	\$379.17			\$0.00
197					\$1,037.83	\$0.00	\$0.00	\$1,037.83			\$0.00
198 199					\$1,037.83 \$365.63	\$0.00 \$0.00	\$0.00 \$0.00	\$1,037.83 \$365.63			\$0.00 \$0.00
200				\$12,850.00	\$12,850.00			\$12,312.40	\$4,902.80	\$241,860.71	\$98,856.89
201					\$1,354.17	\$0.00	\$537.60	\$1,354.17			\$0.00
202					\$468.00	\$0.00	\$0.00	\$468.00			\$0.00
203					\$379.17	\$0.00	\$0.00 \$0.00	\$379.17			\$0.00
203					\$379.17 \$628.33	\$0.00		\$379.17 \$628.33			\$0.00
205					\$136.14	\$0.00 \$0.00	\$0.00 \$0.00	\$136.14			\$0.00
205				\$2,750.43	\$2,829.43	\$0.00	\$1,131.20	\$1,698.23	\$983.80		\$946.20
207			1	\$12,850.00	\$12,850.00	\$1,000.52	\$180.80	\$11,668.68	\$4,717.10	\$111,190.00	\$101,878.84
208					\$492.92	\$0.00	\$0.00	\$492.92			\$0.00
209					\$75.83	\$0.00	\$0.00	\$75.83			\$0.00
210					\$85.76	\$0.00	\$0.00	\$85.76			\$0.00

Employee Number	Claimed Secured Amount	Allowed Secured Claim Amount	Scheduled Priority Amount	Claimed Priority Amount	Allowed Priority Claim Amount	Priority Medical Claim Amount	Priority Dental Claim Amount	Taxable Priority Claim Amount	Scheduled Unsecured Amount	Claimed Unsecured Amount	Allowed Unsecured Claim Amount
211					\$75.83	\$0.00	\$0.00	\$75.83			\$0.00
212					\$4,495.15	\$0.00	\$0.00	\$4,495.15	\$1,526.45	\$1,526.45	\$1,526.45
213				\$386,234.02	\$12,850.00	\$4,231.70	\$1,608.00	\$7,010.30	\$7,819.95	\$165,337.01	\$141,208.32
214					\$985.83	\$0.00	\$0.00	\$985.83	. ,		\$0.00
215					\$4,121.10	\$0.00	\$0.00	\$4,121.10	\$1,521.21		\$539.20
216				\$107,317.28	\$12,850.00	\$0.00	\$552.20	\$12,297.80	\$4,551.55		\$86,948.75
217					\$303.33	\$0.00	\$0.00	\$303.33			\$0.00
218					\$4,258.24	\$0.00	\$191.00	\$4,067.24	\$1,787.15	\$1,787.15	\$1,366.15
219				\$53,237.52	\$12,850.00	\$0.00	\$978.40	\$11,871.60	\$1,000.00		\$38,631.36
220				\$486,151.56	\$12,850.00	\$0.00	\$454.00	\$12,396.00	\$6,429.40		\$114,578.85
221					\$227.50	\$0.00	\$0.00	\$227.50			\$0.00
222 223					\$543.83	\$0.00	\$0.00	\$543.83			\$0.00
224					\$518.92 \$76.74	\$0.00 \$0.00	\$0.00 \$0.00	\$518.92 \$76.74			\$0.00 \$0.00
225				\$1,471.00	\$3,232.46	\$0.00	\$0.00	\$3,232.46	\$1,471.00		\$627.46
226			\$5,493.60	\$22,568.20	\$11,866.58	\$0.00	\$446.00	\$11,420.58	\$4,325.04		\$1,913.51
227			, , , , , ,	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$281.69	\$0.00	\$0.00	\$281.69	\$110.16		\$0.00
228					\$915.42	\$0.00	\$0.00	\$915.42			\$0.00
229				\$146,289.84	\$12,850.00	\$0.00	\$0.00	\$12,850.00	\$4,788.55	\$120,589.84	\$94,700.85
230					\$541.48	\$0.00	\$0.00	\$541.48	\$198.42		\$0.00
231					\$328.61	\$0.00	\$0.00	\$328.61			\$0.00
232 233					\$1,941.87 \$3,427.25	\$0.00	\$200.00	\$1,741.87 \$3,427.25	\$1,713.00		\$0.00 \$770.70
234				£405.004.54		\$0.00	\$0.00 \$144.40		·		\$100,050.67
235			A 4 000 TO	\$125,921.51	\$12,850.00	\$0.00	\$144.40	\$12,705.60	\$5,130.40		\$3,212.60
			\$4,802.70	\$34,312.83	\$12,850.00	\$3,703.33	\$107.00	\$9,039.67	\$3,235.25		
236				\$12,267.61	\$8,599.73	\$0.00	\$2,898.40	\$5,701.33	\$5,617.61		\$2,855.09
237			<b>A</b> E 007 40	\$310,065.22	\$12,850.00	\$0.00	\$193.40	\$12,656.60	\$6,772.80		\$125,140.26
238 239			\$5,237.40	\$35,497.99	\$12,850.00 \$393.43	\$0.00 \$0.00	\$3,266.40 \$0.00	\$9,583.60 \$393.43	\$4,730.70 \$50.39		\$4,380.24 \$0.00
240					\$246.46	\$0.00	\$0.00	\$246.46	φ30.39		\$0.00
241					\$303.33	\$0.00	\$0.00	\$303.33			\$0.00
242					\$1,092.00	\$0.00	\$0.00	\$1,092.00			\$0.00
243					\$1,631.50	\$0.00	\$0.00	\$1,631.50	\$32,604.44	\$32,604.44	\$50,388.89
244				\$5,986.83	\$1,973.20	\$0.00	\$228.80	\$1,744.40	\$5,986.83		\$3,111.09
245		-			\$5,241.81	\$0.00	\$0.00	\$5,241.81	\$4,171.85	\$4,171.85	\$2,753.45
246	\$0.00	\$0.00			\$1,707.88	\$0.00	\$0.00	\$1,707.88			\$0.00
247				\$9,014.16	\$9,679.08	\$0.00	\$0.00	\$9,679.08			\$1,228.90
248					\$936.00	\$0.00	\$0.00	\$936.00			\$0.00
249		_			\$819.00	\$0.00	\$0.00	\$819.00			\$0.00
250					\$1,661.11	\$0.00	\$0.00	\$1,661.11			\$0.00
251					\$468.00	\$0.00	\$0.00	\$468.00			\$0.00
252					\$492.92	\$0.00	\$0.00	\$492.92			\$0.00
253			\$2,850.00		\$12,850.00	\$0.00	\$1,440.00	\$11,410.00	\$12,158.93		\$11,855.39
254			<del>+-,</del>		\$12,850.00	\$0.00	\$0.00	\$12,850.00	\$3,547.85		\$58,278.52

Employee Number	Claimed Secured Amount	Allowed Secured Claim Amount	Scheduled Priority Amount	Claimed Priority Amount	Allowed Priority Claim Amount	Priority Medical Claim Amount	Priority Dental Claim Amount	Taxable Priority Claim Amount	Scheduled Unsecured Amount	Claimed Unsecured Amount	Allowed Unsecured Claim Amount
255				\$100,708.00	\$12,850.00	\$0.00	\$0.00	\$12,850.00	\$4,312.85		\$78,835.76
256				\$25,700.00	\$12,850.00	\$0.00	\$1,702.40	\$11,147.60	\$3,497.05	\$214,940.72	\$87,175.93
257			\$1,222.13	\$2,973.85	\$8,837.04	\$0.00	\$0.00	\$8,837.04	\$1,751.72	\$2,973.85	\$6,637.21
258					\$493.85	\$0.00	\$0.00	\$493.85	\$177.75		\$0.00
259			\$5,155.50	\$26,766.75	\$8,870.76	\$0.00	\$1,235.00	\$7,635.76	\$315.22		\$0.00
260					\$45.14	\$0.00	\$0.00	\$45.14	_		\$0.00
261					\$315.31	\$0.00	\$0.00	\$315.31	\$58.02		\$0.00
262 263					\$254.58 \$292.50	\$0.00 \$0.00	\$0.00 \$0.00	\$254.58 \$292.50			\$0.00 \$0.00
264					\$985.83	\$0.00	\$0.00	\$985.83			\$0.00
265					\$996.26	\$0.00	\$0.00	\$996.26			\$0.00
266					\$1,110.42	\$0.00	\$0.00	\$1,110.42			\$0.00
267					\$68.61	\$0.00	\$0.00	\$68.61			\$0.00
268				\$3,276.14	\$9,204.74	\$5,606.96	\$170.40	\$3,427.38	\$3,276.14		\$1,571.15
269					\$23.47	\$0.00	\$0.00	\$23.47			\$0.00
270					\$6,233.54	\$1,464.36	\$803.00	\$3,966.18	\$408.63		\$0.00
271			\$4,725.00	\$8,164.16	\$8,485.40	\$0.00	\$0.00	\$8,485.40	\$1,175.50		\$1,175.50
272			\$5,075.70	\$10,717.96	\$9,091.96	\$0.00	\$0.00	\$9,091.96	\$1,471.02		\$1,261.70
273					\$664.26	\$0.00	\$0.00	\$664.26			\$0.00
274 275					\$3,505.95	\$2,710.47	\$185.00	\$610.48	\$2,332.36	\$2,332.36	\$1,947.60 \$0.00
				A	\$1,037.83	\$0.00	\$0.00	\$1,037.83	0100150		
276 277				\$118,933.70	\$12,850.00	\$510.82	\$424.00	\$11,915.18	\$4,394.50		\$83,206.88 \$0.00
278					\$252.78	\$0.00	\$0.00 \$0.00	\$252.78	¢4 024 00		\$719.32
279					\$3,375.78	\$0.00	\$0.00	\$3,375.78	\$1,834.00		\$0.00
280					\$468.00	\$0.00	\$0.00	\$468.00			\$0.00
					\$3,491.39	\$0.00	\$0.00	\$3,491.39	\$421.00		
281 282					\$543.83	\$0.00	\$0.00 \$0.00	\$543.83			\$0.00 \$0.00
283					\$1,037.83 \$644.58	\$0.00 \$0.00	\$0.00	\$1,037.83 \$644.58			\$0.00
284				\$7,173.85	\$12,110.88	\$0.00	\$876.00	\$11,234.88	\$7,173.85		\$4,975.05
285					\$1,214.42	\$0.00	\$0.00	\$1,214.42			\$0.00
286			\$5,050.50	\$12,061.51	\$10,050.52	\$0.00	\$175.20	\$9,875.32	\$2,335.40		\$1,255.40
287					\$492.92	\$0.00	\$0.00	\$492.92			\$0.00
288					\$492.92	\$0.00	\$0.00	\$492.92			\$0.00
289					\$1,784.25	\$0.00	\$0.00	\$1,784.25			\$0.00
290					\$227.50	\$0.00	\$0.00	\$227.50			\$0.00
291					\$1,248.00	\$0.00	\$0.00	\$1,248.00			\$0.00
292					\$543.83	\$0.00	\$0.00	\$543.83			\$0.00
293					\$1,591.60	\$0.00	\$0.00	\$1,591.60			\$0.00
294				\$31,348.82	\$7,424.28	\$0.00	\$552.80	\$6,871.48	\$31,348.82		\$21,366.61
295					\$699.13	\$0.00	\$0.00	\$699.13	\$341.38	\$341.38	\$0.00
296					\$379.17	\$0.00	\$0.00	\$379.17			\$0.00

Employee Number	Claimed Secured Amount	Allowed Secured Claim Amount	Scheduled Priority Amount	Claimed Priority Amount	Allowed Priority Claim Amount	Priority Medical Claim Amount	Priority Dental Claim Amount	Taxable Priority Claim Amount	Scheduled Unsecured Amount	Claimed Unsecured Amount	Allowed Unsecured Claim Amount
297					\$492.92	\$0.00	\$0.00	\$492.92			\$0.00
298					\$492.92	\$0.00	ψ0.00	\$492.92			\$0.00
299					\$452.52	\$0.00	\$0.00	φ492.92			\$1,328.35
233			\$5,346.60	\$11,410.63	\$10,962.76	\$0.00	\$0.00	\$10,962.76	\$2,101.35		ψ1,320.33
300					\$1,087.67	\$0.00	\$0.00	\$1,087.67	\$51,962.82	\$81,655.27	\$81,655.89
301					\$631.94	\$0.00	\$0.00	\$631.94			\$0.00
302					\$5,524.76	\$899.97	\$202.00	\$4,422.79	\$2,915.66	\$93,901.11	\$1,926.50
303					\$5,397.90	\$0.00	\$466.40	\$4,931.50	\$6,896.40	\$6,896.40	\$4,244.13
304					\$4,273.98	\$0.00	\$0.00	\$4,273.98			\$0.00
305					\$12,850.00	\$0.00	\$142.20	\$12,707.80			\$113,050.56
306					\$985.83	\$0.00	\$0.00	\$985.83			\$0.00
307					\$1,983.58	\$0.00	\$1,493.80	\$489.78			\$0.00
308					\$1,191.67	\$0.00	\$0.00	\$1,191.67			\$0.00
309					\$1,721.78	\$0.00	\$78.00	\$1,643.78	\$4,712.13		\$3,470.19
310					\$9,066.69	\$0.00	\$0.00	\$9,066.69	\$8,468.70		\$3,972.70
311					\$486.34	\$0.00	\$0.00	\$486.34	ψο, 100.110		\$0.00
312					\$2,010.69			\$2,010.69	\$734.00		\$275.87
313					\$463.60	\$0.00 \$0.00	\$0.00 \$0.00	\$463.60	\$120.54	\$120.54	\$0.00
314						φυ.υυ	ψ0.00		\$120.54	φ120.3 <del>4</del>	\$0.00
0					\$455.00	\$0.00	\$0.00	\$455.00			ψοισσ
315					\$166.11	\$0.00	\$0.00	\$166.11			\$0.00
316					\$789.93	\$0.00	\$0.00	\$789.93			\$0.00
317					\$518.92	\$0.00	\$0.00	\$518.92			\$0.00
318					\$1,180.48			\$1,180.48	\$21.00		\$0.00
319					\$6,869.02	\$0.00	\$0.00	\$5,527.02	\$3,883.85	\$3,883.85	\$2,620.85
000						\$0.00	\$1,342.00		φο,σσοίσσ	ψο,οσοίσο	A=0= 0.4
320					\$2,961.54	\$0.00	\$0.00	\$2,961.54	*****		\$525.84
321					\$3,722.50	\$0.00	\$0.00	\$3,722.50	\$214.64		\$917.18
322					\$225.69	\$0.00	\$0.00	\$225.69			\$0.00
323					\$3,239.83	\$0.00	\$535.80	\$2,704.03			\$1,500.00
324 325					\$569.29	\$0.00	\$0.00	\$569.29			\$0.00 \$0.00
325					\$468.00	\$0.00	\$0.00	\$468.00			\$0.00
326					\$1,947.83	\$0.00	\$0.00 \$0.00	\$1,947.83			\$0.00
328					\$902.78 \$985.83	\$0.00		\$902.78 \$985.83			\$0.00
						\$0.00	\$0.00				
329				\$4,179.39	\$1,289.40	\$0.00	\$0.00	\$1,289.40	\$4,179.39		\$2,933.65
330					\$885.06	\$0.00	\$0.00	\$885.06	\$833.40	\$833.40	\$564.80
331				\$159,812.00	\$12,850.00	\$0.00	\$380.00	\$12,470.00	\$4,903.20		\$98,762.18
332	\$12,850.00	\$0.00			\$12,850.00	\$0.00	\$1,550.40	\$11,299.60	\$6,640.95	\$129,916.64	\$122,373.39
333					\$704.17	\$0.00	\$0.00	\$704.17			\$0.00
334					\$518.92	\$0.00	\$0.00	\$518.92			\$0.00
335					\$133.71	\$0.00	\$0.00	\$133.71			\$0.00
336				\$134,504.70	\$12,850.00	\$0.00	\$122.00	\$12,728.00	\$3,453.85		\$75,839.20
337				\$108,199.56	\$12,850.00	\$0.00	\$85.00	\$12,765.00	\$4,772.10		\$93,413.87
338					\$199.24	\$0.00	\$0.00	\$199.24	\$27.71		\$0.00
339					\$606.67	\$0.00	\$0.00	\$606.67			\$0.00
340						\$0.00		İ			\$0.00
					\$358.00	\$0.00	\$358.00	\$0.00			

Employee Number	Claimed Secured Amount	Allowed Secured Claim Amount	Scheduled Priority Amount	Claimed Priority Amount	Allowed Priority Claim Amount	Priority Medical Claim Amount	Priority Dental Claim Amount	Taxable Priority Claim Amount	Scheduled Unsecured Amount	Claimed Unsecured Amount	Allowed Unsecured Claim Amount
341				\$12,850.00	\$12,850.00	\$0.00	\$2,878.24	\$9,971.76	\$7,044.20	\$47,723.64	\$137,535.65
342					\$6,683.28	\$0.00	\$2,456.00	\$4,227.28	\$1,056.00		\$197.30
343					\$468.00	\$0.00	\$0.00	\$468.00			\$0.00
344					\$468.00	\$0.00	\$0.00	\$468.00			\$0.00
345					\$4,782.61	\$0.00	\$486.00	\$4,296.61	\$2,479.94	\$2,479.94	\$1,461.55
346					\$4,791.98	\$0.00	\$1,580.00	\$3,211.98	\$3,445.73		\$2,740.40
347 348					\$4,871.24	\$0.00	\$405.40 \$0.00	\$4,465.84	\$2,634.37		\$1,589.27 \$0.00
349					\$2,264.89 \$492.92	\$0.00 \$0.00	\$0.00	\$2,264.89 \$492.92			\$0.00
350					\$9,893.91	\$0.00	\$2,808.00	\$7,085.91	\$6,274.78		\$4,446.88
351				\$7,703.00	\$5,625.46	\$0.00	\$1,662.00	\$3,963.46	\$3,438.95		\$2,267.47
352				, , , , , , , , , , , , , , , , , , , ,	\$300.92	\$0.00	\$0.00	\$300.92	**,		\$0.00
353					\$518.92	\$0.00	\$0.00	\$518.92			\$0.00
354					\$1,037.83	\$0.00	\$0.00	\$1,037.83			\$0.00
355					\$227.50	\$0.00	\$0.00	\$227.50			\$0.00
356					\$455.00	\$0.00	\$0.00	\$455.00			\$0.00
357					\$3,163.94	\$0.00	\$1,288.00	\$1,875.94	\$2,883.68	\$1,971.00	\$244.69
358					\$468.00	\$0.00	\$0.00	\$468.00			\$0.00
359					\$3,935.49	\$0.00	\$0.00	\$3,935.49	\$1,543.05	\$1,543.03	\$1,707.90
360					\$2,963.82	\$0.00	\$0.00	\$2,963.82	\$1,500.61	\$2,115.48	\$613.48
361 362					\$1,050.83 \$3,461.00	\$0.00 \$0.00	\$0.00 \$0.00	\$1,050.83 \$3,461.00			\$0.00 \$0.00
363					\$3,461.00 \$644.58	\$0.00	\$0.00	\$644.58			\$0.00
364					\$227.50	\$0.00	\$0.00	\$227.50			\$0.00
365					\$903.69	\$0.00	\$0.00	\$903.69			\$0.00
366				\$12,850.00	\$12,850.00	\$0.00	\$7,409.40	\$5,440.60	\$4,536.80	\$133,573.82	\$102,398.46
367			\$1,071.75		\$5,069.31	\$0.00	\$0.00	\$5,069.31	\$1,464.73		\$0.00
368					\$468.00	\$0.00	\$0.00	\$468.00			\$0.00
369					\$1,138.58	\$0.00	\$0.00	\$1,138.58			\$0.00
370					\$1,782.08	\$0.00	\$0.00	\$1,782.08			\$0.00
371					\$12,850.00	\$0.00	\$150.00	\$12,700.00	\$6,306.70	\$6,306.70	\$112,256.70
372 372A				\$1,000.00	\$3,080.50 \$1,000.00	\$0.00 \$0.00	\$0.00 \$0.00	\$3,080.50 \$1,000.00			\$0.00 \$0.00
372B				ψ1,000.00	\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
372C					\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
372D					\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
372E					\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
372F 372G					\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00			\$0.00 \$0.00
372G 372H					\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
3721					\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
372J					\$0.00	\$0.00	\$0.00	\$0.00	-		\$0.00
372K					\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
372L 372M					\$0.00 \$0.00	\$0.00	\$0.00	\$0.00 \$0.00			\$0.00 \$0.00
372N					\$0.00	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00			<b>60.00</b>
372N 372O						\$0.00	φυ.00				\$0.00 \$0.00
372P					\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00	\$0.00 \$0.00			\$0.00
372P					\$0.00	\$0.00	\$0.00				\$0.00

Employee Number	Claimed Secured Amount	Allowed Secured Claim Amount	Scheduled Priority Amount	Claimed Priority Amount	Allowed Priority Claim Amount	Priority Medical Claim Amount	Priority Dental Claim Amount	Taxable Priority Claim Amount	Scheduled Unsecured Amount	Claimed Unsecured Amount	Allowed Unsecured Claim Amount
372R					\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
372S					\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
372T					\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
372U					\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
372V					\$0.00	\$0.00	\$0.00	\$0.00		\$3,239.80	\$0.00
372W					\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
372X					\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
372Y					\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
372Z					\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
372AA					\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
372BB					\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
372CC					\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
372DD					\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
372EE					\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
372FF					\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
372GG					\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
372HH					\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
37211					\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
372JJ					\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
372KK					\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
372LL					\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
372MM					\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
372NN					\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
37200					\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
372PP					\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
372QQ					\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
372RR					\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
372SS					\$0.00	\$0.00	\$0.00	\$0.00			\$0.00
	\$14,943.35	\$0.00	\$102,100.67	\$4,887,473.45	\$1,356,593.74	\$66,249.18	\$109,602.44	\$1,180,742.12	\$659,108.10	\$1,944,537.76	\$4,885,537.13

## CLASS B MEMBERS

Employee	Scheduled	Claimed	Allowed Priority	Priority Medical	Priority Dental	Taxable Priority	Scheduled	Claimed	Allowed Unsecured
Number	<b>Priority Amount</b>	<b>Priority Amount</b>	Claim Amount	Claim Amount	Claim Amount	Claim Amount	<b>Unsecured Amount</b>	<b>Unsecured Amount</b>	Claim Amount
373		\$11,510.42	\$6,672.82	\$3,569.77	\$1,346.40	\$1,756.65	\$11,510.42		\$6,060.05
374		\$9,174.80	\$2,420.60	\$0.00	\$0.00	\$2,420.60	\$9,174.80		\$5,899.34
375		\$3,000.00	\$48.00	\$0.00	\$48.00	\$0.00			\$0.00
376			\$1,938.00	\$0.00	\$1,938.00	\$0.00			\$0.00
377			\$2,960.00	\$0.00	\$2,960.00	\$0.00			\$0.00
378			\$951.03	\$325.31	\$625.72	\$0.00			\$0.00
379			\$1,761.78	\$1,352.18	\$409.60	\$0.00			\$0.00
380			\$0.00	\$0.00	\$0.00	\$0.00			\$9,158.65
381			\$1,740.80	\$0.00	\$1,740.80	\$0.00			\$0.00
382			\$197.00	\$0.00	\$197.00	\$0.00			\$0.00
383			\$0.00	\$0.00	\$0.00	\$0.00	\$39,283.02		\$57,988.97
384			\$90.00	\$0.00	\$90.00	\$0.00			\$0.00
385			\$0.00	\$0.00	\$0.00	\$0.00	\$1,461.20		\$1,461.20
386			\$0.00	\$0.00	\$0.00	\$0.00	\$34,228.32	\$52,306.15	\$53,786.96
387			\$280.00	\$0.00	\$280.00	\$0.00			\$0.00
388		\$9,294.01	\$0.00	\$0.00	\$0.00	\$0.00	\$37,176.04	\$48,159.87	\$57,453.88
389			\$398.00	\$0.00	\$398.00	\$0.00			\$0.00
390		\$69,996.05	\$0.00	\$0.00	\$0.00	\$0.00	\$51,086.70		\$86,700.94
391			\$268.00	\$0.00	\$268.00	\$0.00			\$0.00
392			\$80.00	\$0.00	\$80.00	\$0.00			\$0.00
393			\$0.00	\$0.00	\$0.00	\$0.00	\$72,355.08	\$115,423.97	\$113,701.23
394			\$1,003.00	\$0.00	\$1,003.00	\$0.00			\$0.00
395			\$135.82	\$0.00	\$0.00	\$135.82			\$135.81
396			\$2,010.00	\$0.00	\$2,010.00	\$0.00			\$0.00
397			\$0.00	\$0.00	\$0.00	\$0.00	\$40,685.40	\$127,868.40	\$64,902.90
398			\$402.30	\$398.30	\$4.00	\$0.00			\$0.00
399			\$2,750.01	\$2,750.01	\$0.00	\$0.00			\$0.00
400			\$340.00	\$0.00	\$340.00	\$0.00			\$0.00
401			\$1,282.00	\$0.00	\$1,282.00	\$0.00			\$0.00
402			\$56.00	\$0.00	\$56.00	\$0.00	\$67,518.36		\$106,100.41

Employee Number	Scheduled Priority Amount	Claimed Priority Amount	Allowed Priority Claim Amount	Priority Medical Claim Amount	Priority Dental Claim Amount	Taxable Priority Claim Amount	Scheduled Unsecured Amount	Claimed Unsecured Amount	Allowed Unsecured Claim Amount
403			\$3,481.83	\$245.83	\$3,236.00	\$0.00			\$0.00
404			\$0.00	\$0.00	\$0.00	\$0.00	\$29,994.80	\$43,911.00	\$46,355.60
405			\$171.00	\$0.00	\$171.00	\$0.00			\$0.00
406			\$3,920.28	\$3,920.28	\$0.00	\$0.00			\$0.00
407			\$1,362.00	\$0.00	\$1,362.00	\$0.00			\$0.00
408			\$783.92	\$20.32	\$763.60	\$0.00			\$0.00
409		\$84,190.01	\$0.00	\$0.00	\$0.00	\$0.00	\$52,775.52		\$82,933.45
410			\$0.00	\$0.00	\$0.00	\$0.00	\$51,994.32		\$81,705.28
411			\$190.00	\$0.00	\$0.00	\$190.00	\$330.80		\$190.00
412			\$419.20	\$0.00	\$419.20	\$0.00			\$0.00
413			\$0.00	\$0.00	\$0.00	\$0.00			\$9,070.10
414			\$651.69	\$651.69	\$0.00	\$0.00			\$0.00
415		\$438.00	\$623.38	\$0.00	\$0.00	\$623.38	\$438.00		\$103.92
416			\$886.40	\$0.00	\$886.40	\$0.00			\$0.00
417			\$1,855.41	\$0.00	\$0.00	\$1,855.41	\$3,257.16		\$412.31
418			\$2,970.20	\$616.80	\$2,353.40	\$0.00			\$0.00
419			\$8,051.48	\$7,045.88	\$1,005.60	\$0.00			\$0.00
420		\$12,850.00	\$0.00	\$0.00	\$0.00	\$0.00	\$45,148.84	\$56,925.48	\$69,775.69
421			\$1,340.00	\$0.00	\$1,340.00	\$0.00			\$0.00
422			\$1,540.00	\$0.00	\$1,540.00	\$0.00	\$42.38		\$42.38
423		\$241.00	\$579.75	\$0.00	\$312.00	\$267.75	\$241.00	\$241.00	\$74.97
424		\$116,151.69	\$0.00	\$0.00	\$0.00	\$0.00			\$116,150.70
425			\$315.00	\$0.00	\$315.00	\$0.00			\$0.00
426			\$7,003.95	\$2,012.35	\$4,991.60	\$0.00			\$0.00
427			\$0.00	\$0.00	\$0.00	\$0.00			\$82,597.21
428			\$962.60	\$0.00	\$962.60	\$0.00	\$695.68	\$695.68	\$0.00
429			\$133.00	\$0.00	\$133.00	\$0.00			\$0.00
430			\$0.00	\$0.00	\$0.00	\$0.00	\$75,200.58		\$118,172.08
431			\$555.40	\$0.00	\$555.40	\$0.00			\$0.00
432		\$135,143.00	\$0.00	\$0.00	\$0.00	\$0.00	\$39,330.48		\$61,804.52
433			\$110.40	\$0.00	\$110.40	\$0.00			\$0.00

Employee Number	Scheduled Priority Amount	Claimed Priority Amount	Allowed Priority Claim Amount	Priority Medical Claim Amount	Priority Dental Claim Amount	Taxable Priority Claim Amount	Scheduled Unsecured Amount	Claimed Unsecured Amount	Allowed Unsecured Claim Amount
434			\$2,997.04	\$2,777.04	\$220.00	\$0.00			\$0.00
435			\$316.80	\$0.00	\$316.80	\$0.00			\$0.00
436			\$2,219.00	\$0.00	\$0.00	\$2,219.00			\$4,224.17
437			\$0.00	\$0.00	\$0.00	\$0.00			\$1,500.00
438			\$111.20	\$0.00	\$111.20	\$0.00			\$0.00
439			\$644.20	\$0.00	\$644.20	\$0.00			\$0.00
TOTAL:	\$0.00	\$451,988.98	\$71,980.29	\$25,685.76	\$36,825.92	\$9,468.61	\$663,928.90	\$445,531.55	\$1,238,462.72